

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2006 8:00 am
Secretary of State

02-21-2006 90015 042 ***150.00

DOCUMENT # V22848 1. Entity Name JUDE REALTY CORP.					
Principal Place of Business 1241 W. NEWPORT CTR DR. DEERFIELD BEACH, FL 33442 US			Mailing Address 1241 W. NEWPORT CTR DR. DEERFIELD BEACH, FL 33442 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0321231	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
GRANDE, FRANK 1241 W NEWPORT CTR DR DEERFIELD BEACH, FL 33442			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GRANDE, FRANK	NAME			
STREET ADDRESS	401 E LINTON BLVD APT 577	STREET ADDRESS			
CITY-ST-ZIP	DELRAY BCH, FL	CITY-ST-ZIP			
TITLE	ST <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GRANDE, MARJORIE	NAME			
STREET ADDRESS	401 E LINTON BLVD APT 577	STREET ADDRESS			
CITY-ST-ZIP	DELRAY BCH, FL	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GRANDE, JOAN M.	NAME	1241 W Newport Center Drive		
STREET ADDRESS	17813 FIELDBROOK CIRCLE WEST	STREET ADDRESS	DEERFIELD BEACH, FL 33442		
CITY-ST-ZIP	BOCA RATON, FL 33496	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GRANDE, JUDITH C.	NAME			
STREET ADDRESS	1054 LEIGH MILL RD	STREET ADDRESS			
CITY-ST-ZIP	GREAT FALLS, VA	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: FRANK GRANDE <div style="float: right; text-align: right;"> Jan 27. 06 <small>Date Daytime Phone #</small> </div>					